



Senate Committee On

Health Regulation

Jeffery H. "Jeff" Atwater, Chair
Gary Siplin, Vice Chair

Meeting Packet

Tuesday, October 2, 2007
3:30 p.m. – 5:30 p.m.
401 Senate Office Building

***(Please bring this packet to the committee meeting.
Duplicate materials will not be available.)***

EXPANDED AGENDA

COMMITTEE ON HEALTH REGULATION

Senator Atwater, CHAIR
Senator Siplin, VICE CHAIR

DATE: Tuesday, October 2, 2007
TIME: 3:30 p.m. -- 5:30 p.m.
PLACE: Room 401, Senate Office Building

(MEMBERS: Senators Alexander, Aronberg, Fasano, Jones, Lawson, and Peaden)

TAB	BILL NO. AND INTRODUCER	BILL DESCRIPTION AND SENATE COMMITTEE ACTIONS	COMMITTEE ACTION
1	Discussion of home health agency regulatory issues		
2	Status report on implementation of CS/CS/SB 770 (Chapter 2007-172, Laws of Florida) relating to physician workforce planning		
3	Discussion of the adoption and sharing of electronic health records		

**NO MATERIAL
AVAILABLE FOR
THIS TAB**

Physician Workforce Project: Implementation of SB 770

Report to Florida Senate
Committee on Health Regulation
October 2, 2007
Florida Department of Health

Physician Workforce Project

Implementation of SB 770

SB 2260, establishing the State Surgeon General states, in part:

“The State Surgeon General shall serve as the leading voice on wellness and disease-prevention efforts, including the promotion of healthful lifestyles, immunization practices, health literacy, and the **assessment and promotion of the physician and health care workforce** in order to meet the health care needs of the state.”

Physician Workforce Project Implementation of SB 770

- The State Surgeon General and the Department of Health have established a strategic priority to develop a reliable, valid means to collect, analyze, and disseminate information on Florida's physician workforce.

Physician Workforce Project

Implementation of SB 770

Key Components of Legislation

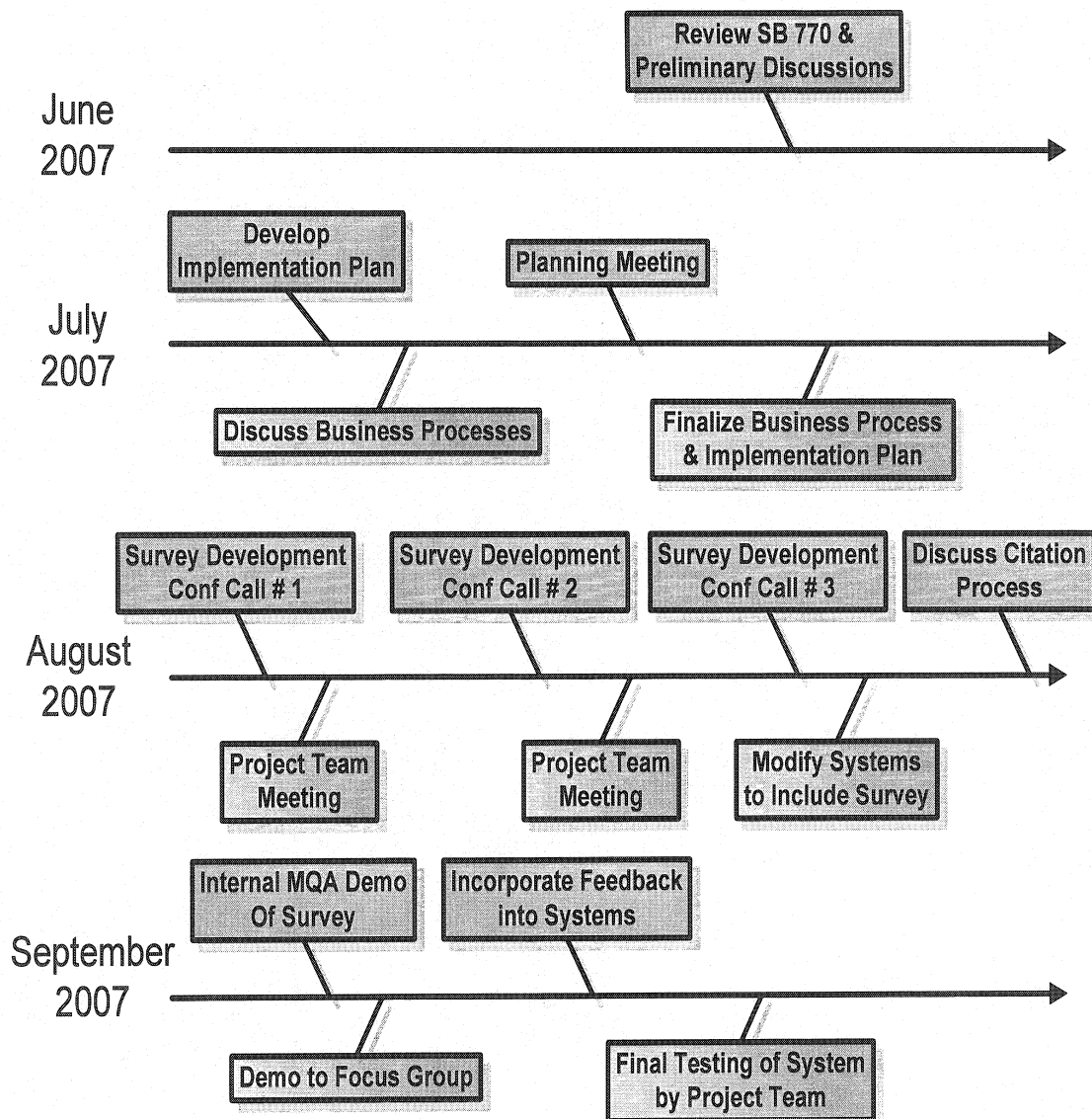
- Coordinating Governmental and Non-Governmental Stakeholders for Planning
- Data Analysis and Annual Report
- Monitor, Evaluate and Report on Data
- Survey Development
- Maintain Database
- DOH as Clearinghouse and Liaison

Physician Workforce Project

Implementation of SB 770

- Opportunities
 - Work with stakeholders to develop survey questions included in 2007 Physician Licensure Renewal Cycle
 - Challenges
 - Renewal deadlines
 - Working within Department's existing resources
 - Achieving consensus from governmental and non governmental stakeholders, including stakeholders named in legislation

Physician Workforce Project Implementation of SB 770



Physician Workforce Project

Implementation of SB 770

- Series of 3 Conference Calls in August with over 60 stakeholders to discuss critical issues, and challenges including:
 - Rule Development
 - Survey Question Development and Input
 - Time Constraints of 2007 Physician Renewal Process
 - Department Resources

Physician Workforce Project Implementation of SB 770

PROGRESS AND NEXT STEPS

- Consensus on Survey Questions, including Specialty Groups Named in Legislation
- Survey Testing and Implementation
- Continued Work with Stakeholders on Data Analysis
- Report Development and Dissemination, November 2008

Physician Workforce Project

Implementation of SB 770

Allopathic Physicians

- October 1, 2007 - Renewal notices mailed to 25,000 physicians
 - Paper Survey insert
 - On-line Survey
- January 31, 2008-Licenses expire
- February 28, 2008-Data extract to Division of Health Access and Tobacco

Physician Workforce Project

Implementation of SB 770

Osteopathic Physicians

- December 1, 2007 - Renewal notices mailed
 - Paper Survey insert
 - On-line Survey
- March 31, 2008 - Licenses expire
- April 2008 - Data extract to Division of Health Access and Tobacco

1. Do you practice medicine at any time during the year in Florida?

☐ Yes. Please continue.

☐ No. If No, thank you for taking this survey. Please skip to the Affirmation Statement.

2. How many months per year do you practice in Florida?

☐ 1 - 4 Months



☐ 5 - 8 Months

☐ 9 - 12 Months

3. In what Florida counties is your medical practice located? (may select up to 5 counties)

For each county selected: How many hours per week do you practice in each setting?

County List:
(Click to select)

ALACHUA	 
BAKER	
BAY	
BRADFORD	
BREVARD	
BROWARD	

Hours per Week:
(Click to select)

1 - 20 Hrs/Wk
21 - 40 Hrs/Wk
More than 40 Hrs/Wk

		Reset Selection
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		Reset Selection
		Reset Selection
		Reset Selection
		Reset Selection

4. Are you in a solo practice?

☐ Yes

☐ No

5. Which practice setting best describes where the majority of your time is spent?

☐ Private Office Setting

☐ Federally Qualified Health Center

Physician Workforce Project

Implementation of SB 770

Citation Process

- Mail non-disciplinary citation notices 90 days after expiration date.
 - April 30, 2008-Medical Doctors
 - June 30, 2008 - Osteopathic Physicians
- Mail non-renewal notification letter 150 days prior to next renewal cycle

Physician Workforce Project

Implementation of SB 770

Citation/Non-renewal

A practitioner prohibited from renewing if:

- Survey not completed for previous renewal cycle (2008 and 2009)

AND

- Survey not completed for current renewal cycle (2009 and 2010)

AND

- NOT the first renewal

Physician Workforce Project Implementation of SB 770

- Example: A medical doctor whose license expires 1/31/10 cannot renew if:
 - Survey was not completed between 10/01/07 and 9/30/09

AND

- Survey is not completed during their subsequent renewal cycle (10/01/09 – 1/31/10)

AND

- Licensed prior to 2007 (?) (i.e., first renewal)

Physician Workforce Project Implementation of SB 770

Questions please contact

Lucy C. Gee, M.S.P., Director, Medical Quality
Assurance at lucy_gee@doh.state.fl.us

CHAPTER 2007-172

Committee Substitute for

Committee Substitute for Senate Bill No. 770

An act relating to the physician workforce; creating s. 381.4018, F.S.; providing legislative intent; requiring that the Department of Health serve as a coordinating and planning body to assess the state's future workforce needs for physicians; requiring the department to develop strategies for addressing the current and projected workforce needs; specifying additional functions of the department; requiring each allopathic and osteopathic physician in the state to complete a survey concerning the physician's practice as a condition of license renewal; specifying the information to be furnished to the department in the physician survey; providing for a nondisciplinary citation to be issued to a physician or osteopathic physician who fails to complete the required survey; requiring the department to provide notice of the applicable penalty; providing rulemaking authority; requiring the department to annually analyze and evaluate the results of the survey; requiring the department to report its findings

to the Governor and the Legislature; providing legislative intent concerning resources for implementation of the act; providing an effective date.

Be It Enacted by the Legislature of the State of Florida:

Section 1. Section 381.4018, Florida Statutes, is created to read:

381.4018 Physician workforce assessment and development.--

(1) LEGISLATIVE INTENT.--The Legislature recognizes that physician workforce planning is an essential component of ensuring that there is an adequate and appropriate supply of well-trained physicians to meet this state's future health care service needs as the general population and elderly population of the state increase. The Legislature finds that items to consider relative to assessing the physician workforce may include physician practice status; specialty mix; geographic distribution; demographic information, including, but not limited to, age, gender, race, and cultural considerations; and needs of current or projected medically underserved areas in the state. Long-term strategic planning is essential as the period from the time a medical student enters medical school to completion of graduate medical education may range from 7 to 10 years or longer. The Legislature recognizes that strategies to provide for a well-trained supply of physicians must include ensuring the availability and capacity of

quality graduate medical schools in this state, as well as using new or existing state and federal programs providing incentives for physicians to practice in needed specialties and in underserved areas in a manner that addresses projected needs for physician manpower.

(2) PURPOSE.--The Department of Health shall serve as a coordinating and strategic planning body to actively assess the state's current and future physician workforce needs and work with multiple stakeholders to develop strategies and alternatives to address current and projected physician workforce needs.

(3) GENERAL FUNCTIONS.--The department shall maximize the use of existing programs under the jurisdiction of the department and other state agencies and coordinate governmental and nongovernmental stakeholders and resources in order to develop a state strategic plan and assess the implementation of such strategic plan. In developing the state strategic plan, the department shall:

(a) Monitor, evaluate, and report on the supply and distribution of physicians licensed under chapter 458 or chapter 459. The department shall maintain a database to serve as a statewide source of data concerning the physician workforce.

(b) Develop a model and quantify, on an ongoing basis, the adequacy of the state's current and future physician workforce as reliable data becomes available. Such model must take into account

demographics, physician practice status, place of education and training, generational changes, population growth, economic indicators, and issues concerning the "pipeline" into medical education.

(c) Develop and recommend strategies to determine whether the number of qualified medical school applicants who might become competent, practicing physicians in this state will be sufficient to meet the capacity of the state's medical schools. If appropriate, the department shall, working with representatives of appropriate governmental and nongovernmental entities, develop strategies and recommendations and identify best-practice programs that introduce health care as a profession and strengthen skills needed for medical school admission for elementary, middle, and high school students, and improve premedical education at the precollege and college level in order to increase this state's potential pool of medical students.

(d) Develop strategies to ensure that the number of graduates from the state's public and private allopathic and osteopathic medical schools are adequate to meet physician workforce needs, based on the analysis of the physician workforce data, so as to provide a high-quality medical education to students in a manner that recognizes the uniqueness of each new and existing medical school in this state.

(e) Pursue strategies and policies to create, expand, and maintain graduate medical education positions in the state based

on the analysis of the physician workforce data. Such strategies and policies must take into account the effect of federal funding limitations on the expansion and creation of positions in graduate medical education. The department shall develop options to address such federal funding limitations. The department shall consider options to provide direct state funding for graduate medical education positions in a manner that addresses requirements and needs relative to accreditation of graduate medical education programs. The department shall consider funding residency positions as a means of addressing needed physician specialty areas, rural areas having a shortage of physicians, and areas of ongoing critical need, and as a means of addressing the state's physician workforce needs based on an ongoing analysis of physician workforce data.

(f) Develop strategies to maximize federal and state programs that provide for the use of incentives to attract physicians to this state or retain physicians within the state. Such strategies should explore and maximize federal-state partnerships that provide incentives for physicians to practice in federally designated shortage areas. Strategies shall also consider the use of state programs, such as the Florida Health Service Corps established pursuant to s. 381.0302 and the Medical Education Reimbursement and Loan Repayment Program pursuant to s. 1009.65, which provide for education loan repayment or loan forgiveness and provide monetary incentives for physicians to relocate to underserved areas of the state.

(g) Coordinate and enhance activities relative to physician workforce needs, undergraduate medical education, and graduate medical education provided by the Division of Medical Quality Assurance, the Community Hospital Education Program and the Graduate Medical Education Committee established pursuant to s. 381.0403, area health education center networks established pursuant to s. 381.0402, and other offices and programs within the Department of Health as designated by the secretary.

(h) Work in conjunction with and act as a coordinating body for governmental and nongovernmental stakeholders to address matters relating to the state's physician workforce assessment and development for the purpose of ensuring an adequate supply of well-trained physicians to meet the state's future needs. Such governmental stakeholders shall include, but need not be limited to, the Secretary of Health or his or her designee, the Commissioner of Education or his or her designee, the Secretary of Health Care Administration or his or her designee, and the Chancellor of the State University System or his or her designee from the Board of Governors of the State University System, and, at the discretion of the department, other representatives of state and local agencies that are involved in assessing, educating, or training the state's current or future physicians. Other stakeholders shall include, but need not be limited to, organizations representing the state's public and private allopathic and osteopathic medical schools; organizations representing hospitals and other institutions providing health

care, particularly those that have an interest in providing accredited medical education and graduate medical education to medical students and medical residents; organizations representing allopathic and osteopathic practicing physicians; and, at the discretion of the department, representatives of other organizations or entities involved in assessing, educating, or training the state's current or future physicians.

(i) Serve as a liaison with other states and federal agencies and programs in order to enhance resources available to the state's physician workforce and medical education continuum.

(j) Act as a clearinghouse for collecting and disseminating information concerning the physician workforce and medical education continuum in this state.

Section 2. (1) Each person who applies for licensure renewal as a physician under chapter 458 or chapter 459, Florida Statutes, must, in conjunction with the renewal of such license under procedures adopted by the Department of Health and in addition to any other information that may be required from the applicant, furnish the following to the Department of Health in a physician survey:

(a) Licensee information, including, but not limited to:

1. Frequency and geographic location of practice within the state.

2. Practice setting.

3. Percentage of time spent in direct-patient care.

4. Anticipated change to license or practice status.

5. Areas of specialty or certification.

(b) Availability and trends relating to critically needed services, including, but not limited to:

1. Obstetric care and services, including incidents of deliveries.

2. Radiological services, particularly performance of mammograms and breast-imaging services.

3. Physician services for hospital emergency departments and trauma centers, including on-call hours.

4. Other critically-needed specialty areas, as determined by the department.

(2) Such information furnished must include a statement submitted by the physician that the information provided is true and accurate to the best of his or her knowledge and the submission does not contain any knowingly false information.

(3)(a) The Department of Health shall issue a nondisciplinary citation to any physician licensed under chapter 458 or chapter 459, Florida Statutes, who fails to complete the

survey within 90 days after the renewal of his or her license to practice as a physician.

(b) The citation must notify a physician who fails to complete the survey required by this section that his or her license will not be renewed for any subsequent license renewal unless the physician completes the survey.

(c) In conjunction with issuing the license-renewal notice required by s. 456.038, Florida Statutes, the Department of Health shall notify each physician licensed under 458 or chapter 459, Florida Statutes, who has failed to complete the survey at the licensee's last known address of record with the Department of Health of the requirement that the physician survey be completed prior to the subsequent license renewal. At any subsequent license renewal, the Department of Health may not renew the license of any physician licensed under chapter 458 or chapter 459, Florida Statutes, until the survey required under this section is completed by the licensee.

(4) The Department of Health shall adopt rules pursuant to ss. 120.536(1) and 120.54, Florida Statutes, necessary to implement this section.

Section 3. (1) Each year, the Department of Health shall analyze the results of the physician survey required by section 2 of this act and determine by geographic area and specialty the number of physicians who:

(a) Perform deliveries of children in Florida.

(b) Read mammograms and perform breast-imaging-guided procedures in Florida.

(c) Perform emergency care on a on-call basis for a hospital emergency department.

(d) Plan to reduce or increase emergency on-call hours in a hospital emergency department.

(e) Plan to relocate their allopathic or osteopathic practice outside the state.

(2) The Department of Health must report its findings to the Governor, the President of Senate, and the Speaker of the House of Representatives by November 1 each year.

Section 4. It is the intent of the Legislature that the Department of Health implement the provisions of this act within existing resources.

Section 5. This act shall take effect upon becoming a law.

Approved by the Governor June 19, 2007.

Filed in Office Secretary of State June 19, 2007.



**Florida Agency for Health Care Administration
Florida Center for Health Information and Policy Analysis**

AHCA's Long Term Plan for the Sharing of Electronic Health Records

**Florida Senate
Senate Health Regulation Committee
October 2, 2007**

**Florida Senate, Senate Health Regulation Committee
October 2, 2007**



Long Term Plan for Sharing Electronic Health Records

- Continue the FHIN Grants Program
- Sustainability of RHIOs
- Health Information Technology Committee
- Health Information Security and Privacy Collaboration
- Engage Pilot Projects for Adoption of EHRs
 - Medicaid Transformation Grant Proposal
 - FCC Rural Broadband Pilot Project Proposal



Continue the FHIN Grants Program

- The Florida Health Information Network is based on the collaboration of Regional Health Information Networks (RHIOs) in Florida
- Each RHIO is responsible for developing a health information exchange and working with local providers to use the RHIO portal
- Goal: Continue funding the FHIN Grants Program to maintain the continuity of technical development and community support



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FHIN Grants Program, 2007-2008

Organization	Matching Funds	Grant Funding	Total Funding Impact
Department of Veterans' Affairs	\$70,614	\$70,614	\$141,228
Big Bend Regional Healthcare Information Organization	\$651,000	\$249,750	\$900,750
Duval County Health Department	\$927,362	\$406,944	\$1,334,306
Florida Healthcare Coalition/Central Florida Regional Health Information Organization	\$468,809	\$200,000	\$668,809
North West Florida Regional Health Information Organization	\$420,000	\$296,250	\$716,250
Palm Beach County Community Health Alliance	\$540,168	\$200,000	\$740,168
South Florida Health Information Initiative	\$496,262	\$284,924	\$781,186
Tampa Bay Regional Research and Educational Foundation	\$1,095,224	\$246,618	\$1,341,842
Palm Beach County Community Health Alliance - Florida Alliance of RHIOs	\$50,927	\$44,900	\$95,827
	\$4,720,366	\$2,000,000	\$6,720,365

**Florida Senate, Senate Health Regulation Committee
October 2, 2007**



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Projected 2007-2008 Operational Metrics

No.	Metrics Description	Target 10/2007 – 12/2007	Target 01/2008- 03/2008	Target 4/2008 – 06/2008	TOTAL PROJECTIONS
1	Number of hospitals, clinics, or other facilities authorized to use the network (attach list)	16	27	54	97
2	Number of hospitals, clinics, or other facilities sharing data within the network (attach list)	10	27	59	96
3a	Number of physician offices authorized to use the network (attach list)	112	432	610	1,154
3b	Number of clinicians authorized to use network	220	595	916	1,731
4	Number of patients participating in the network	563,564	95,364	172,714	831,642
5	Number of queries to the network from facilities or physician offices	12,250	32,250	50,848	95,348
6	Number of queries from facilities or physician offices returning results	3,250	6,550	19,761	29,561
TOTAL PROJECTIONS		579,422	135,245	244,962	959,629

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October 2, 2007**



RHIO Technical Assistance

- Foster the development of the Florida Association of Regional Health Information Organizations
- Strengthen stakeholder participation through:
 - Social capital investment in public/private partnerships and collaborative best practices
 - Enhanced provider, practitioner and community education
- Orchestrate the development of sound community-centric RHIO financial business sustainability models that meet GAAP and include rigorous security and privacy risk assessment
- AHCA will facilitate state, regional, and local HIT education and training and network RHIOs into national initiatives and funding opportunities



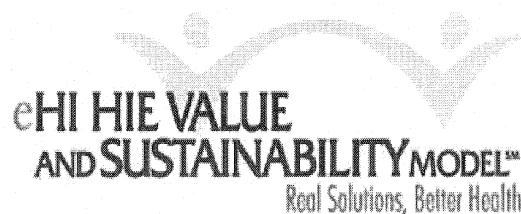
Sustainability of RHIOs

- eHealth Initiative Value Sustainability Model
 - Health Information Exchange Value Model
 - Market Readiness Tool
 - Business Risk Estimator
 - Financial Pro Forma Tool
- eHI Consultants worked with the Florida RHIOs during Summer of 2007



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eHI Value Sustainability Model



One of the first steps in this tool is to define the list of HIE functionalities that your community will implement. eHI has asked a panel of experts to define a list of possible HIE functionalities, presented below. However, you may not find the specific function you are looking for on the list. Or, you may wish to combine several functions under a single label. If so, you may enter up to three of your own function labels in the yellow cells below.

Standard List of HIE Functions	User-Defined Functions (Optional)
Case management and care coordination	Enter User Defined Function #1
Claims management	Enter User Defined Function #2
Clinical document sharing	Enter User Defined Function #3
Health plan enrollment verification	
Historical allergy list	
Historical procedure list	
Historical visit/hospitalization list	
Medical record	
Medication decision support (safety or other alerts)	

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Health Information Technology Committee

- Mission of the HIT Committee

The Health Information Technology Committee shall advise and support the Agency for Health Care Administration ("Agency") to develop and implement a strategy for the establishment of a privacy-protected, secure, and integrated statewide network for the communication of electronic health records among authorized parties pursuant to Florida Statute.

- Composed of Consumers, State and National Leaders in Health Information Technology



Health Information Technology Committee

- Comprehensive Responsibilities
 - Provide guidance for RHIOs and Health Information Exchanges (HIEs) operating in Florida
 - Support the FHIN Grants Program: reviewing and evaluate applications - making selection and funding recommendations
 - Assist the Agency as it develops and implements specific programs or strategies such for Electronic Health Records
 - Recommend technical standards and collaborate with stakeholders to develop best practices recommendations for the different types of health information exchanges



Florida Agency for Health Care Administration
Florida Center for Health Information and Policy Analysis

Health Information Security and Privacy Collaboration

- Reconvene Legal Work Group and develop priority recommendations
- Create risk assessment tool for RHIOs
- Hold forums on privacy and security of health information exchange
- Participation in States' collaboratives to continue in 2008

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October 2, 2007



HISPC Legal Working Group

- Develop priority legislative recommendations
 - What legislative action would have the most immediate impact and what options are supported and feasible?
 - What are the key barriers to organized health information exchange (RHIOs)?
 - What are the key barriers to public sector participation?
- Review statutory analysis for update



Engage Pilot Projects for Adoption of EHRs

- o Examine Application Service Provider model and potential role of RHIOs
- o Restructure FHIN Grants Program to support RHIO pilot projects
- o Explore options for matching funding of Medicaid pilots



Engage Pilot Projects for Adoption of Electronic Medical Records

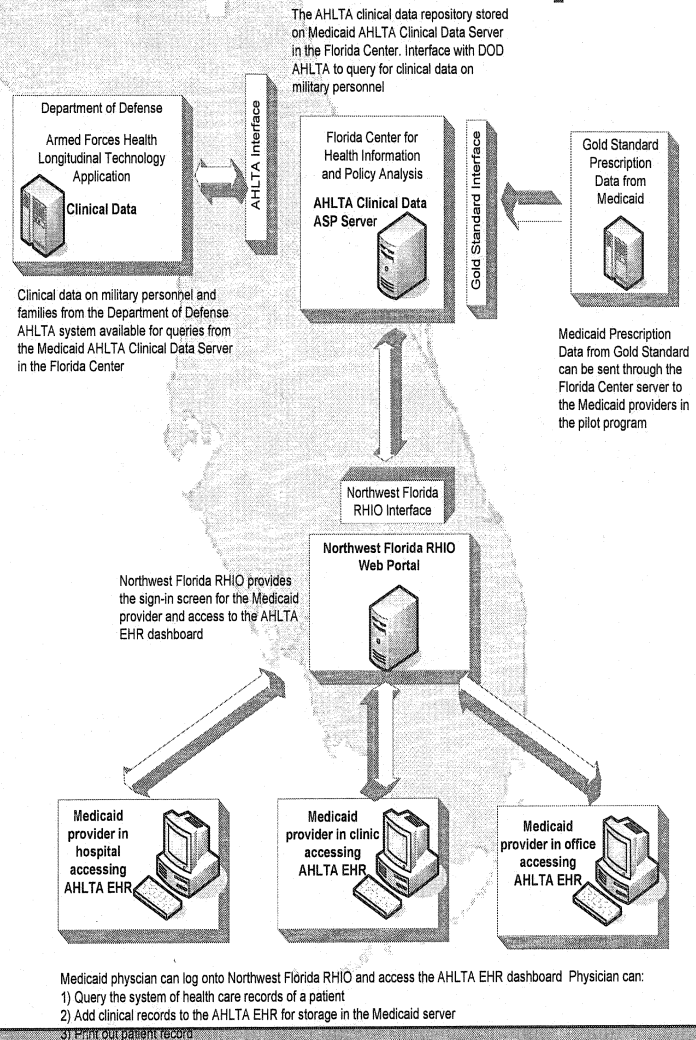
- o Working to locate funding for a pilot project to incentivize physicians to adopt electronic medical record systems
- o Application Service Provider model EMR that RHIO would operate for revenue stream
- o Develop training tools for physician acceptance
- o Create clinical repository within RHIO to support both EHRs and PHRs



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Medicaid Transformation Grant Proposal

- Provide electronic medical record system to Medicaid physicians in Escambia County.
- Use a data feed from the DoD Health Information System for making military medical records accessible to Medicaid physicians

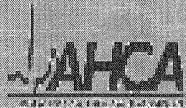


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Medicaid Claims-Based Electronic Health Record System

- o Working with the new Medicaid fiscal agent, EDS, on a pilot project to roll out a claims-based EHR for Medicaid physicians
- o Medicaid pilot to work with Big Bend RHIO to integrate the claims data feed for display on the Big Bend portal
- o Plan to roll out the Medicaid EHR through RHIO portals in spring 2008



Work with the Florida Association of RHIOs (FAR)

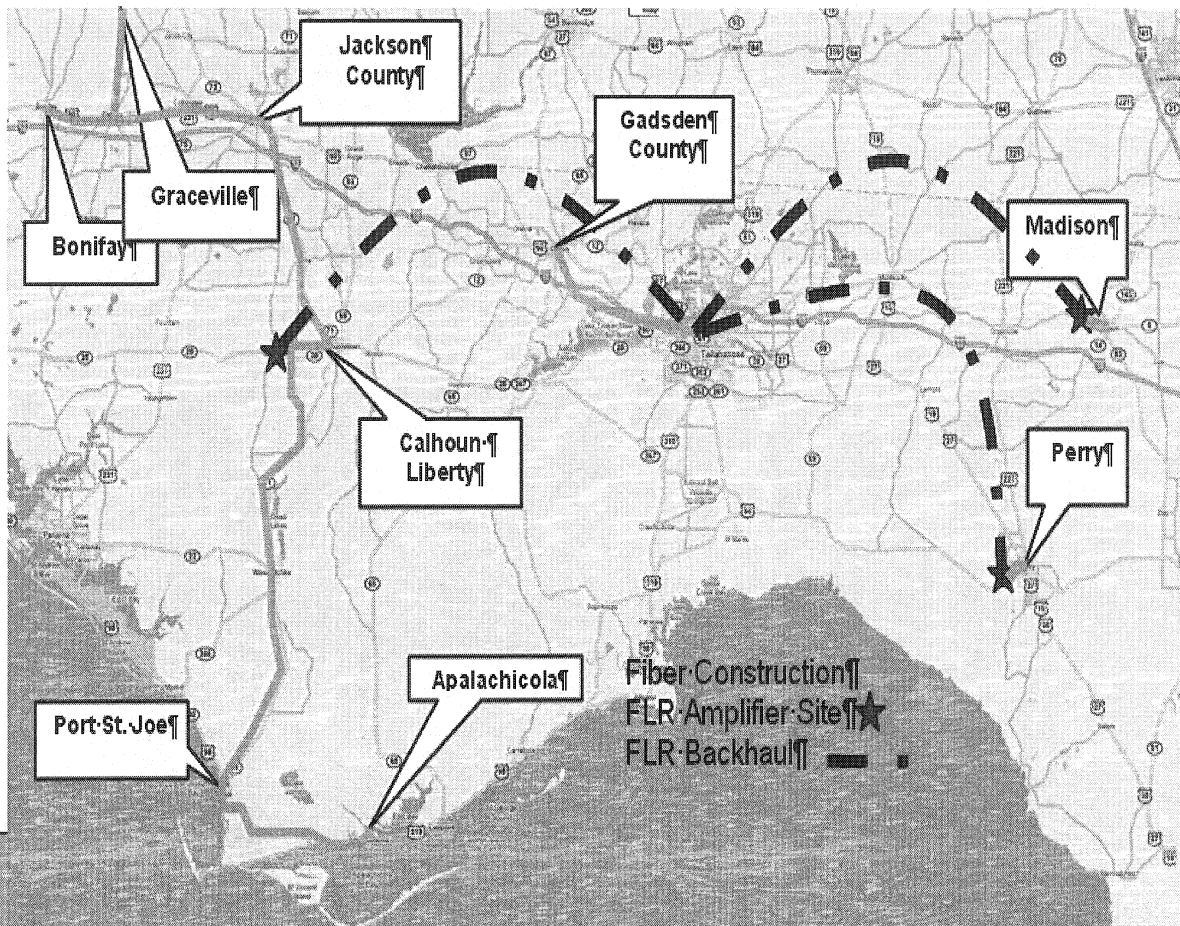
- Develop policies and procedures and security and privacy standards with the RHIOs
- Foster savings in volume purchasing of HIT, network and data center services, and business operations
- Support standardization and interoperability of EHR systems and related interfaces
- Examine low cost open-source EHR solutions that can be installed in small physician practices and community clinics.
- Provide EHR adoption education and technical assistance to providers and practitioners



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FCC Rural Broadband Pilot Project

Connect Nine Rural Hospitals in the Florida Panhandle with Gigabit Optical Fiber



OCTOBER 2, 2007

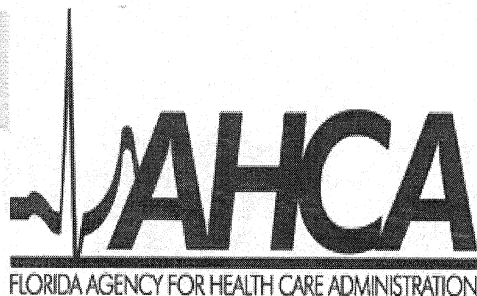


Vision for the Florida Health Information Network

- o The Florida Health Information Network vision will integrate clinical health information exchange in Florida through a network architecture that will empower physicians to access timely and accurate medical records in order to deliver high quality medical care for their patients.



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Florida Center for Health Information and Policy Analysis**



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